

PERMIT FEE \$ PER	RMIT NO.:
RECEIPT No.: G- ROA	AD No.:
APPLICATION DATE: ROA	AD NAME:
APPROVAL DATE: ARE	EA:
TBI	 M:

APPLICA	ATION AND	PERMIT CENT	ΓER		твм:	
	ROAD CLOSURE PERMIT				Rev 2/8/18	
PERMITTEE:				CONTACT PERSON:		
Address:			TELEPHONE		NUMBER:	
CITY/STATE/	ZIP:			FAX NUMBER:		
PURPOSE:						
	-					
LOCATION:						
TIME LIMIT:	DATE:	To:		Including Saturday(s)) AND SUNDAY(S)	YES □ NO
	Hours:	(AM/PM)	То	(AM/PM)		
TYPE OF INST	ALLATION:	☐ TRAVERSE TO ROAD		NGITUDINAL TO ROAD		
TYPE OF CLOS					For Office Use	
		AFFIC 24-HOURS EACH DAY		☐ Work Completed	l Inspector	r:
☐ PARTIAL (CLOSURE 24-HOURS E	ACH DAY.		☐ Expired	Date:	
	E CLOSURE TO THROU	GH TRAFFIC DURING WORKIN	G HOURS.	☐ Looks OK — No I	nspection Reques	ted
	CLOSURE TO THROUGH	TRAFFIC DURING WORKING	HOURS.			
_		FFIC, ALLOWING LOCAL AND E ALLOWED PASSAGE AT ALL TI		TIC AT ALL TIMES.		
DOLLARS SIGNED D	GENERAL COMMERCIA DETOUR VIA NEIGHBOR	AL AND AUTOMOBILE LIABILIT ING STREETS. ILED WITH THE PUBLIC WOR	ry.	RS, EMPLOYEES AND AGENTS AS ADDITIONAL	LY INSURED IN THE AM	OUNT OF ONE MILLION
newspape specificati 2. All signing 3. The perm	nittee shall notify a ers affected by the ions relating thereto g shall be in accorda ittee shall notify all	e closure, and shall cor o, and the policy on road	mply with the reconstruction of the distinct of the distinct of the road closes.	ne Sheriff's Office, any School Districts requirements of the ordinance code e California Manual on Uniform Traffic o osure.	of Contra Costa (
law by reaso condemnatior any claim or a	n of injury to or on, which may arise action asserting suc	leath of any person(s) o out of the work covered l ch a liability. Accepting t	or damage to p by this permit a his permit or sta	of Contra Costa, its officers, employees property, including without limitation and does agree to defend the County, in arting any work hereunder shall consti- cations authorizing issuance of such pe	liability for trespass its officers, employe itute acceptance and	s, nuisance or inversees and agents agains
Signature of F	Permittee:				Date:	
Print Name:						
Ву:					Date:	
		obert B. Hendry III, Perm ks Director, Contra Costa				

 $\label{lem:condition} \mbox{G:\engsvc\Permit Center\Permit Forms\Road Closure Permit Master $18.$doc} \label{lem:condition}$